

# PATENT PROSECUTION RECEIPT OF FILING

<b>Atty. Docket No:</b> <u>36507-193188</u> <b>Title of Application:</b> <u>ENHANCED SUBSURFACE SCANNING SYSTEM, METHOD AND COMPUTER PROGRAM PRODUCT</u> <b>Application No:</b> <u>10/666,558</u> <b>Patent No. :</b> _____	<b>Attorney/LAA:</b> <u>CJS:cja</u> <b>PTO Due Date:</b> _____ <b>Current Date:</b> <u>May 12, 2008</u> <b>Filing Date:</b> <u>September 22, 2003</u> <b>Issue Date:</b> _____
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The following items were received from Venable LLP, Washington, D.C., by the U.S. Patent & Trademark Office on the date stamped hereon:

## U.S. PTO FEES ENCLOSED

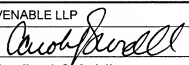
<input checked="" type="checkbox"/> <b>Transmittal Form SB-21</b> <input checked="" type="checkbox"/> <b>Fee Transmittal Letter</b> New U.S. Patent Application (____ pages of specification/claims) Rule 53(d) Continued Prosecution Application Rule 53(b) Continuation or Divisional Application (attach copy of specification, claims, drawings and declaration) U.S. National Stage Application of PCT Application Request for Continued Examination (RCE) under 37 CFR 1.114 Application Data Sheet Substitute Specification Priority Document-Cert. Copy of Appln.#: _____; Country: _____; Date Filed: _____ Formal Drawings (____ sheets, Figs.) Inventor Declaration Assignment w/Cover Sheet Response to Notice to File Missing Parts Response to Notice to File Missing Requirements Response to Requirement <input checked="" type="checkbox"/> <b>Yellow Filing receipt</b> <input checked="" type="checkbox"/> <b>Amendment Transmittal</b> <input checked="" type="checkbox"/> <b>Amendment</b> <input checked="" type="checkbox"/> <b>Petition/Request for Extension of Time (2 mo. ext.)</b> Power of Attorney Appeal Brief (in triplicate) / Reply Brief (in triplicate) Request for Oral Hearing Confirmation of Hearing Petition Issue Fee Transmittal Certificate of Correction Maintenance Fee Transmittal Status Inquiry <b>Other:</b> (Please describe below) _____ _____ _____ _____ _____	_____ Filing Fee _____ Search Fee _____ Examination Fee _____ Additional Claim Fee <b>230.00</b> <b>Extension Fee</b> _____ IDS Fee _____ Recordation Fee _____ Notice of Appeal Fee _____ Brief on Appeal _____ Oral Hearing Request Fee _____ Petition Fee _____ Issue Fee _____ Other Fees (Describe) _____ _____ <b>230.00</b> <b>Total Fees Paid</b>  <b>Charge the above fees as follows:</b> <input checked="" type="checkbox"/> USPTO Deposit Account No. 22-0261 <input type="checkbox"/> USPTO Deposit Account No. _____ <input type="checkbox"/> USPTO not to charge any Deposit Account
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Reviewed By:   
 Signature of Attorney

Date: May 12, 2008

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<h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;"><small>(to be used for all correspondence after initial filing)</small></p>		Application Number	10/666,558-Conf. #5541
		Filing Date	September 22, 2003
		First Named Inventor	John H. Sohl, III
		Art Unit	1743
		Examiner Name	K. A. Moss
Total Number of Pages in This Submission		Attorney Docket Number	36507-193188

ENCLOSURES (Check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form SB-17 <input checked="" type="checkbox"/> Transmittal Form SB-21 <input checked="" type="checkbox"/> Amendment <input checked="" type="checkbox"/> Amendment Transmittal <input checked="" type="checkbox"/> Yellow filing receipt <input checked="" type="checkbox"/> Extension of Time Request (2-mo.) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please Identify below):	<div style="border: 1px solid black; height: 40px; width: 100%;"></div>
<div style="border: 1px solid black; padding: 5px;">Remarks</div>			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	VENABLE LLP		
Signature			
Printed name	Caroline J. Swindell		
Date	May 12, 2008	Reg. No.	56,784